

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	21	5/17/94
EXAMINER	313	5-18-94
TYPIST	350	5/18
VERIFIER	724	5-19-94
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

### INDEX OF CLAIMS

Claim	Date	
	Final	Original
1	✓	✓
2	✓	✓
3	✓	✓
4	✓	✓
5	✓	✓
6	✓	✓
7	✓	✓
8	✓	✓
9	✓	✓
10	✓	✓
11	✓	✓
12	✓	✓
13	✓	✓
14	✓	✓
15	✓	✓
16	✓	✓
17	✓	✓
18	✓	✓
19	✓	✓
20	✓	✓
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36	✓	✓
37	✓	✓
38	✓	✓
39	✓	✓
40	✓	✓
41	✓	✓
42	✓	✓
43	✓	✓
44	✓	✓
45	✓	✓
46	✓	✓
47	✓	✓
48	✓	✓
49	✓	✓

SYMBOLS	
—	Rejected
—	Allowed
(Through number)	Canceled
+	Non-rejected
X	Non-selected
I	Interference
A	Appeal
O	Objected

Claim	Date
51	5-19-94
52	5-19-94
53	5-19-94
54	5-19-94
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